

**DRUGS COVERED UNDER THE  
MEDICARE REPLACEMENT DRUG DEMONSTRATION**  
*(updated December 29, 2004)*

| Demonstration Covered Indication                            | Drug/Biological—Compound Name (Brand Name)  |
|---|---|
| Rheumatoid Arthritis  | Adalimumab (Humira)   |
|   | Anakinra (Kineret)  |
|   | Etanercept (Enbrel)   |
| Psoriatic Arthritis   | Etanercept (Enbrel)   |
| Psoriasis   | Efalizumab (Raptiva)<br>Etanercept (Enbrel)   |
| Multiple Sclerosis  | Glatiramer acetate (Copaxone)   |
|   | Interferon beta –1a (Rebif, Avonex)   |
|   | Interferon beta –1b (Betaseron)   |
|   | H.P. Acthar Gel <i>(for patients with recurring or remitting acute exacerbations or painful flare-ups associated with multiple sclerosis)</i> |
| Post Menopausal Osteoporosis<br>(patient must be homebound) | Calcitonin – nasal (Miacalcin – nasal)<br>Risedronate (Actonel)<br>Alendronate (Fosamax)<br>Raloxifene hydrochlorid (Evista)                  |
| Pulmonary Hypertension                                      | Bosentan (Tracleer)   |
| Secondary Hyperparathyroidism                               | Doxercalciferol (Hectoral)  |
| Paget's Disease   | Alendronate (Fosamax)   |
|   | Risedronate (Actonel)   |
| Hepatitis C   | Pegylated interferon alfa-2a (Pegasys)<br>Pegylated interferon alfa-2b (PEG-Intron)   |
| CMV Retinitis   | Valcyte (Valganciclovir)  |
| Acromegaly  | Pegvisomant (Somavert)  |
| Anti-Cancer   |   |
| Cutaneous T-cell Lymphoma                                   | Bexarotene (Targretin)  |
| Non-small cell lung cancer                                  | Gefitinib (Iressa)  |
| Epithelial ovarian cancer                                   | Altretamine (Hexalen)   |
| Chronic Myelogenous Leukemia                                | Imatinib Mesylate (Gleevec)   |
| GI Stromal Tumor  | Imatinib Mesylate (Gleevec)   |
| Multiple Myeloma  | Thalidomide (Thalomid)  |
| Breast Cancer   | Hormonal therapy  |
| Stage 2-4 only  | Anastrozole (Arimidex)  |
|   | Exemestane (Aromasin)   |
|   | Letrozole (Femara)  |
|   | Tamoxifen (Nolvadex)  |

| Demonstration Covered Indication                                     | Drug/Biological—Compound Name (Brand Name) |
|--|--|
|  | Toremifene (Fareston)                      |
| Prophylactic agent to reduce ifosfamide-induced hemorrhagic cystitis | Mesna (Mesnex)                             |